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PTO/SB/08A (08-03)
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Substitute for form 1449/PTO

Sheet 1

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

of 2

Complete if Known				
Application Number	10/805,624			
Filing Date	March 18, 2004			
First Named Inventor	Gabriela Chiosis			
Art Unit	1626			
Examiner Name	S Lee			
Attorney Docket Number	64987-A/JPW/GJG/BJA			

			U. S. PATEN	T DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number  Number-Kind Code <sup>2 (# known)</sup>	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Unes, Where Relevant Passages or Relevant Figures Appear
We the	1	<sup>US-</sup> 6,734,165 B2	05/11/2004	Chiosis et al.	
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		FORE	IGN PATENT DOCU	MENTS		
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Applicant: Gabriela Chiosis et al. U.S. Serial No.: 10/805,624 Filed: March 18, 2004

Exhibit A



PTO/SB/08B (08-03)
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Substitute for form 1449/PTO			MATERIAL.	re required to respond to a collection of information unless it contains a valid OMB control number.  Complete if Known			
Substitu	te for form 1445/PTO			Application Number	10/805,624		
INF	ORMATION	N DIS	CLOSURE	Filing Date	March 18, 2004		
STA	STATEMENT BY APPLICANT			First Named Inventor	Gabriela Chiosis		
				Art Unit	1626		
(Use as many sheets as necessary)			ecessary)	Examiner Name	S. Lee		
Sheet	2	. of	2	Attorney Docket Number	64987-A/JPW/GJG/BJA	フ	

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials*	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
Il	2	Anderson et al. (1975) Journal of the Chemical Society: Perkins Transactions 1, p825-830.	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in cohformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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